

# Missouri Opioids Information: A New Look for the Dashboard

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# Getting to the Dashboard

- <https://health.mo.gov/data/opioids/>
- Or from home page... (<https://health.mo.gov/>)
  - Click “Data & Statistics”



Then... Click “Opioid Crisis Response”



# Dashboard Main Page

## Missouri Opioids Information

[DHSS Home](#) » [Data & Statistics](#) » [opioids](#)

### Resources

Opioid overdose deaths have steadily increased in Missouri. The devastating impact of opioid misuse and overdose places a tremendous burden on our families, communities, and healthcare systems. The Missouri Department of Health and Senior Services (DHSS) is committed to supporting those impacted by the opioid crisis through education, resources, and linkage to treatment. We know that every person saved from an overdose or connected with [resources](#) is a mother, father, sibling or child to someone else.



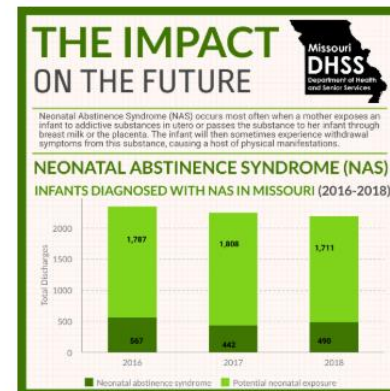
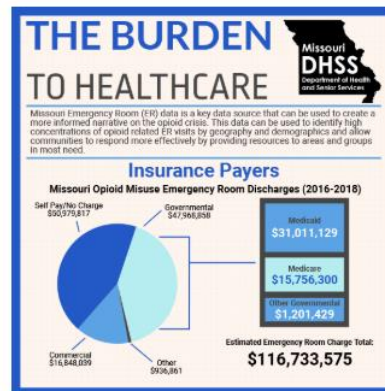
**1 out of every 56 deaths in 2018**  
were due to Opioid Overdose



**1,132** 2018  
Opioid Deaths

Missouri's data tell a troubling story: the opioid epidemic affects all genders, all races, and many age groups in both rural and urban Missouri communities. The impact is multi-dimensional and multi-generational. Trends indicate that misuse in our state, and nationwide, continues to affect people across all demographics.

Each clickable image below provides linkages to data demonstrating the Death Toll, Burden to Healthcare, and Impact on the Future, of the opioid epidemic.

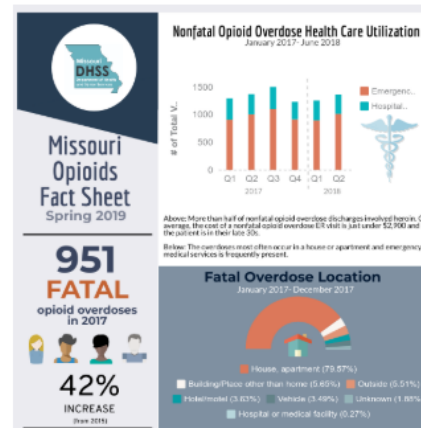


# Dashboard Main Page Cont.

DHSS' efforts to combat this epidemic are expansive. They include:

- Data tracking related to opioids misuse, to show where efforts are most needed and where progress is being made.
- Applying for and receiving grants to aid in the fight against the epidemic to support additional data tracking, awareness/outreach methods and connection to care.
- Expanding access to Narcan, through a standing order signed by DHSS Director, Dr. Randall Williams, to provide access to the medication free for emergency use in high schools, YMCA organizations, public libraries and colleges/universities.
- Pharmacists are authorized to dispense Naloxone without a prescription under another statewide standing order issued by DHSS.
- Naloxone training and distribution through the DHSS MORE program and partnering with the **MO HOPE Project** [↗](#).
- DHSS, with funding from the CDC, is working to finalize county-level vulnerability assessments that will help identify areas of the state that are at the greatest risk for opioid overdoses and bloodborne infections, and findings will be used to allocate resources and target response and prevention services. The full report can be viewed [here](#).
- Establishing the Community Resource Response Team in St. Louis to reduce overdose deaths and homicides within the boundaries of the City of St. Louis, where overdose death rates are the highest in the state. The mobile command unit travels to sites of overdoses to arrange follow-up services for survivors.

DHSS also continues to work with local partners, and provide county level data to assist those partners in identifying best practices to reach and provide service to those in their communities.



For more information on Missouri's government-wide approach to the crisis, visit <https://opioids.mo.gov/>.


# Dashboard Main Page


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[DHSS Home](#) » [Data & Statistics](#) » [opioids](#)

[Resources](#)

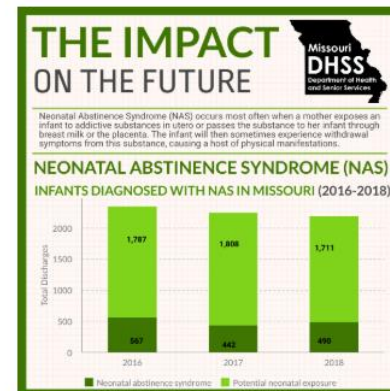
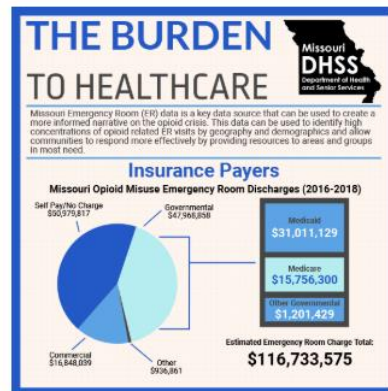
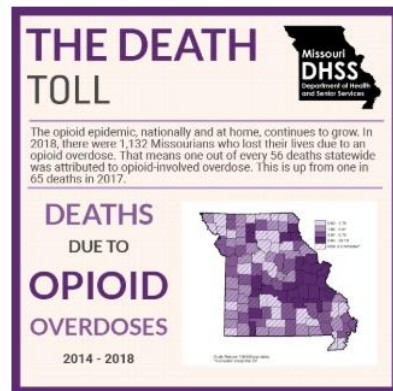
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# Time 2 Act – Stop Opioid Misuse in Missouri



STOP OPIOID MISUSE IN MISSOURI  
Time2ActMissouri.com

Resource Links Naloxone [GET HELP NOW](#)

RESOURCE LINKS

1543


Missouri Lives Saved with Naloxone

1132

Opioid Overdose Deaths in Missouri for 2018


8073

ER Visits Due to Opioid Misuse




Treatment and Support

[www.nomodeaths.org/recovery-services](http://www.nomodeaths.org/recovery-services)  
314.516.8415




Harm Reduction

[health.mo.gov/living](http://health.mo.gov/living)  
573.751.6439




Get Training


[www.nomodeaths.org/provider-education](http://www.nomodeaths.org/provider-education)  
314.516.8415



Missouri Opioids Data



Drug Take Back Locations



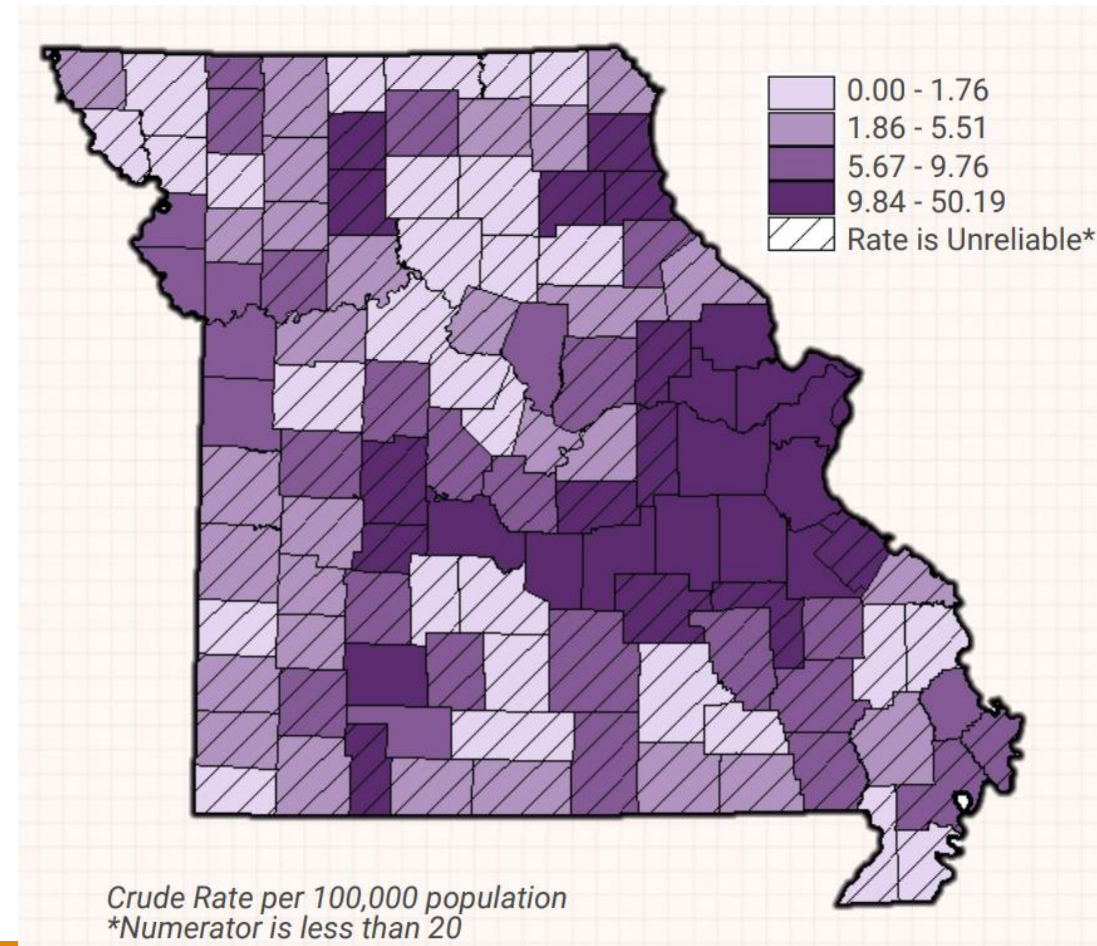
Missouri Initiatives

# The Death Toll

- Maps
  - Opioids, Heroin, and Non-Heroin
- Bar Charts
  - Heroin vs Non-Heroin
  - Quarterly and Monthly Numbers
- Rates by Gender/Race and Age

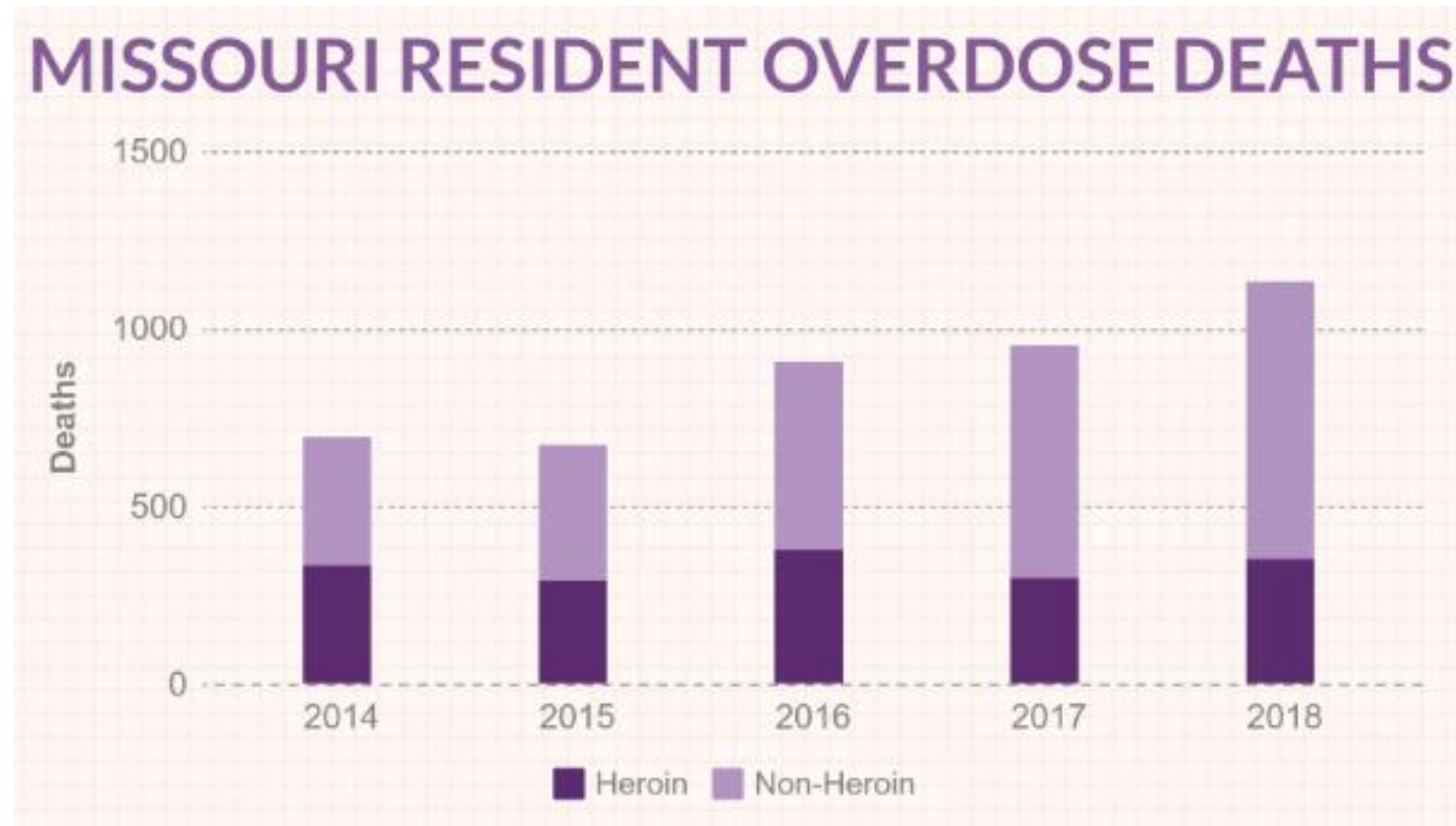


# Opioid Overdose Death Map, 2014-2018

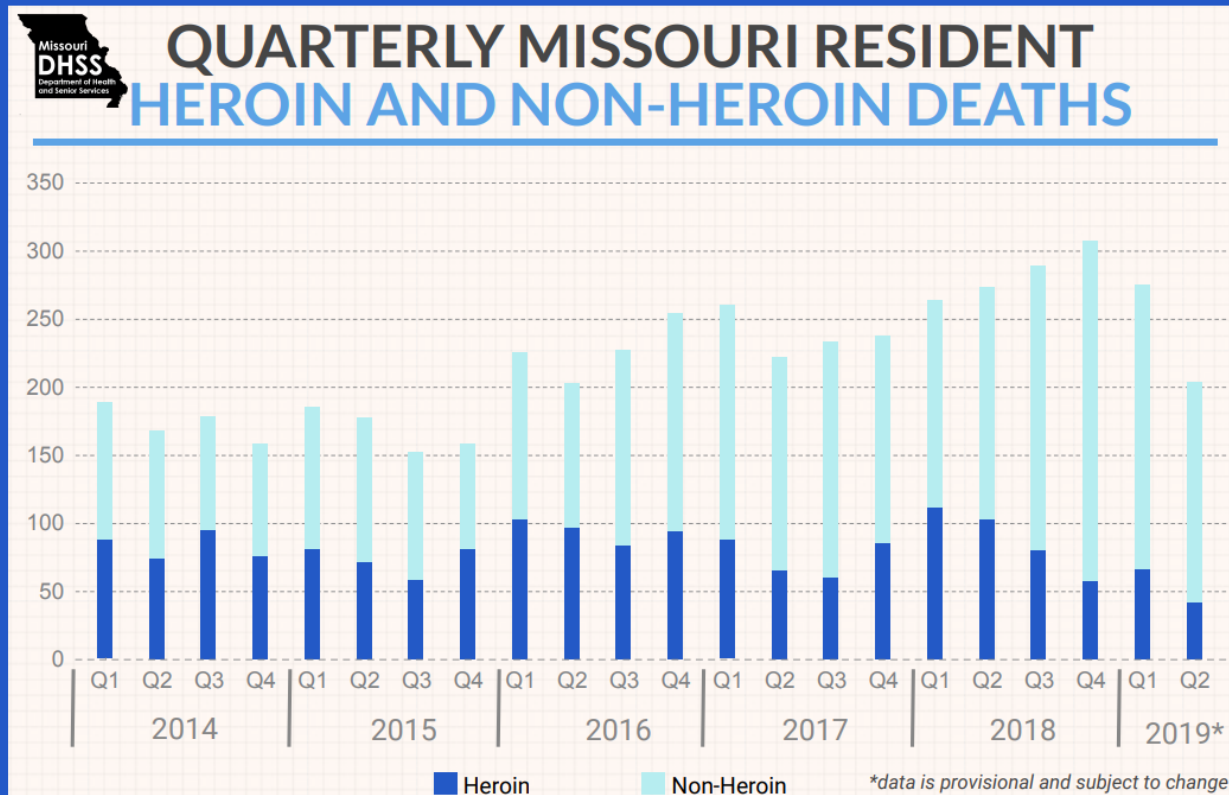
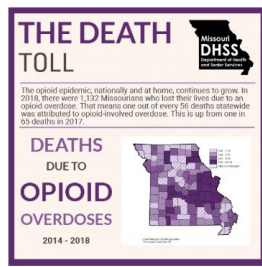




# Bar Charts Drill-down



# Quarterly Data and Provisional 2019 Numbers

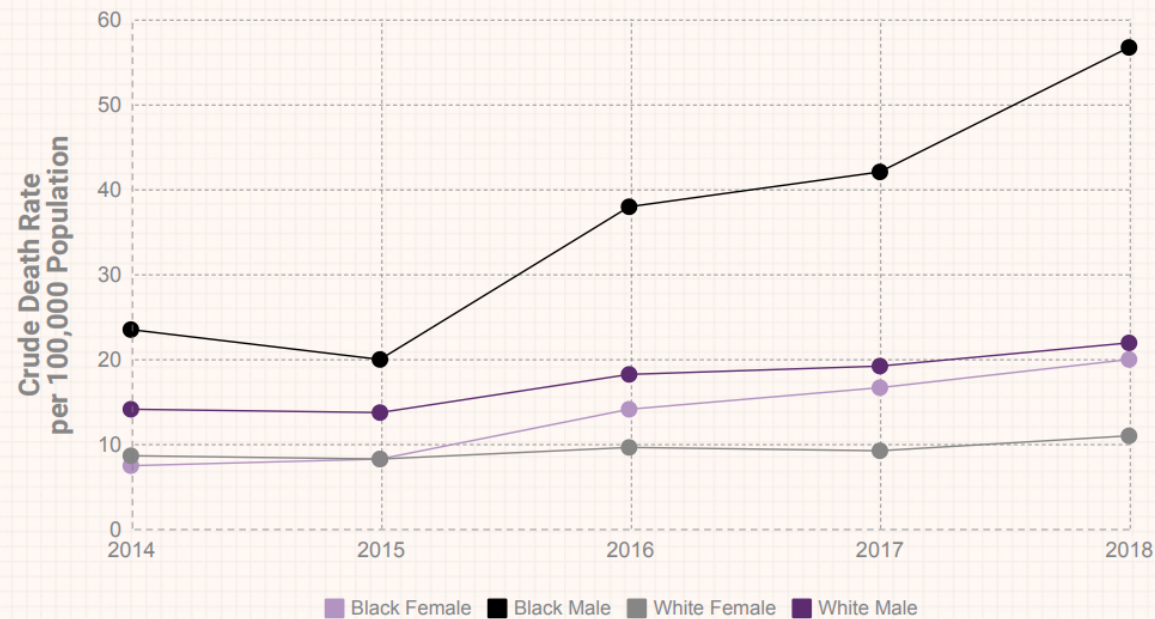


Source: Bureau of Health Care Analysis and Data Dissemination, Missouri Department of Health and Senior Services

These charts track heroin and non-heroin opioid-involved deaths by quarter. While there is a lot of fluctuation from quarter-to-quarter, the overall trend is increasing.

# Opioid Overdose Deaths by Race & Gender

## OPIOID OVERDOSE DEATHS BY GENDER AND RACE

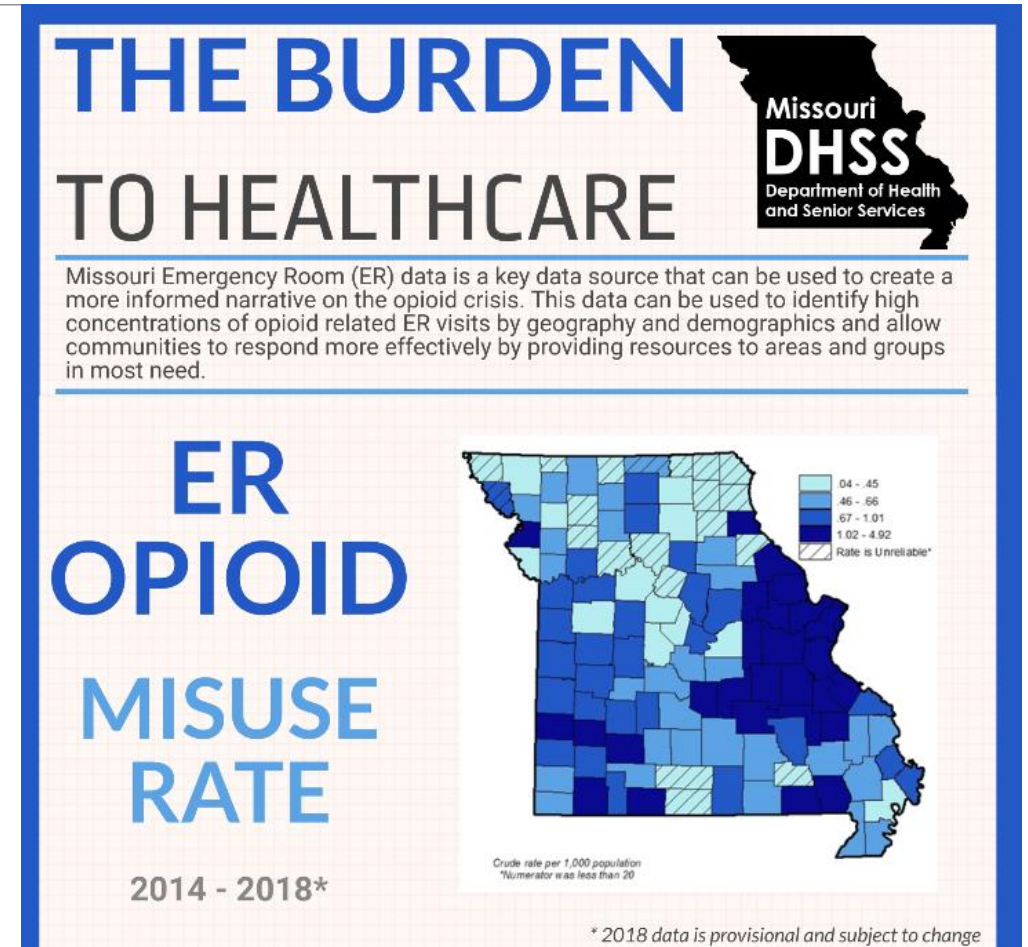


Source: Bureau of Health Care Analysis and Data Dissemination, Missouri Department of Health and Senior Services

All gender/race groups have experienced increases in opioid overdose deaths over the last 5 years. The black male rate started and has remained the highest throughout this time period, experiencing a steep increase of over 140%. White males have the second highest rate after black males, increasing by 56% over 5 years. While the black female rate remains lower than that of black and white males, this group actually experienced the largest increase of 170%. In 2014, black females had the lowest rate of opioid overdose death but by 2018 their rate is only slightly lower than the white male rate.

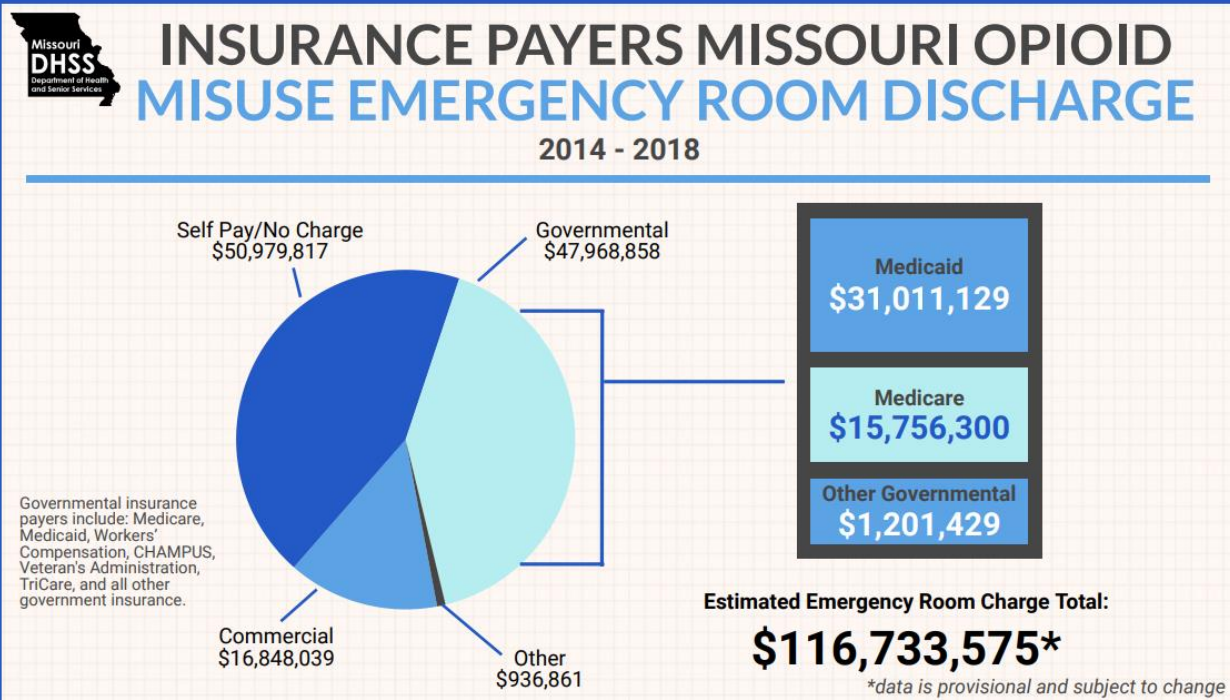
# Burden to Healthcare

- Maps
  - Opioids, Heroin, and Non-Heroin
- Bar Charts
  - Heroin vs Non-Heroin
  - Quarterly Numbers
- Charges by Pay Source
- Visits by Gender/Age Group





# Charges by Pay Source



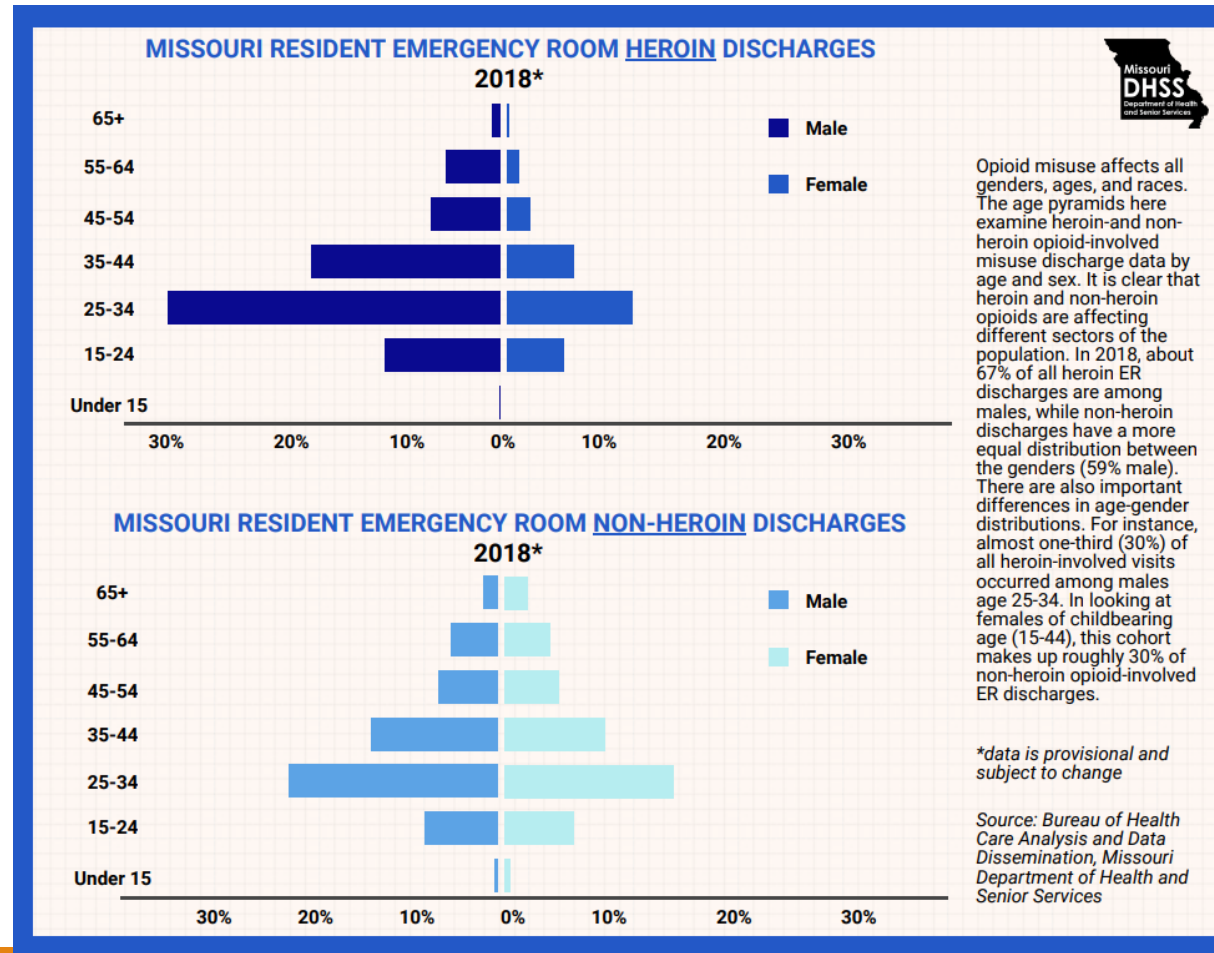
Source: Bureau of Health Care Analysis and Data Dissemination, Missouri Department of Health and Senior Services

Combining the five most recent years of data, charges for opioid-involved emergency room discharges for Missouri residents exceeded \$100 million. Roughly 30% of these charges was paid through governmental insurance sources, with the greatest piece being paid through Medicaid. The next largest proportion of charges fall in the self-pay/no charge category. This indicates a large amount of the cost of opioid-involved overdoses is either being paid out-of-pocket by patients or being absorbed by hospital safety nets. Around 10% of these costs are being paid by private insurance companies.

It is important to note that the charges presented here were the initial charges associated with the visit and do not necessarily represent the cost to the hospital for providing the care nor do they represent the amount actually collected by the hospital for providing the care.

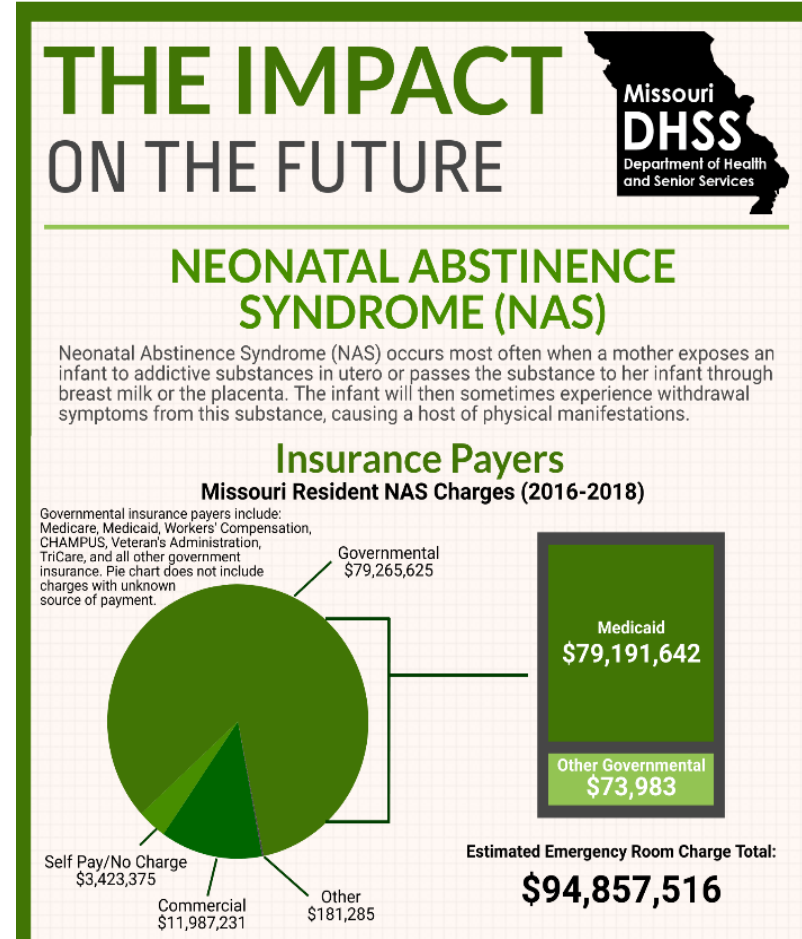


# Heroin vs Non-Heroin by Gender/Age

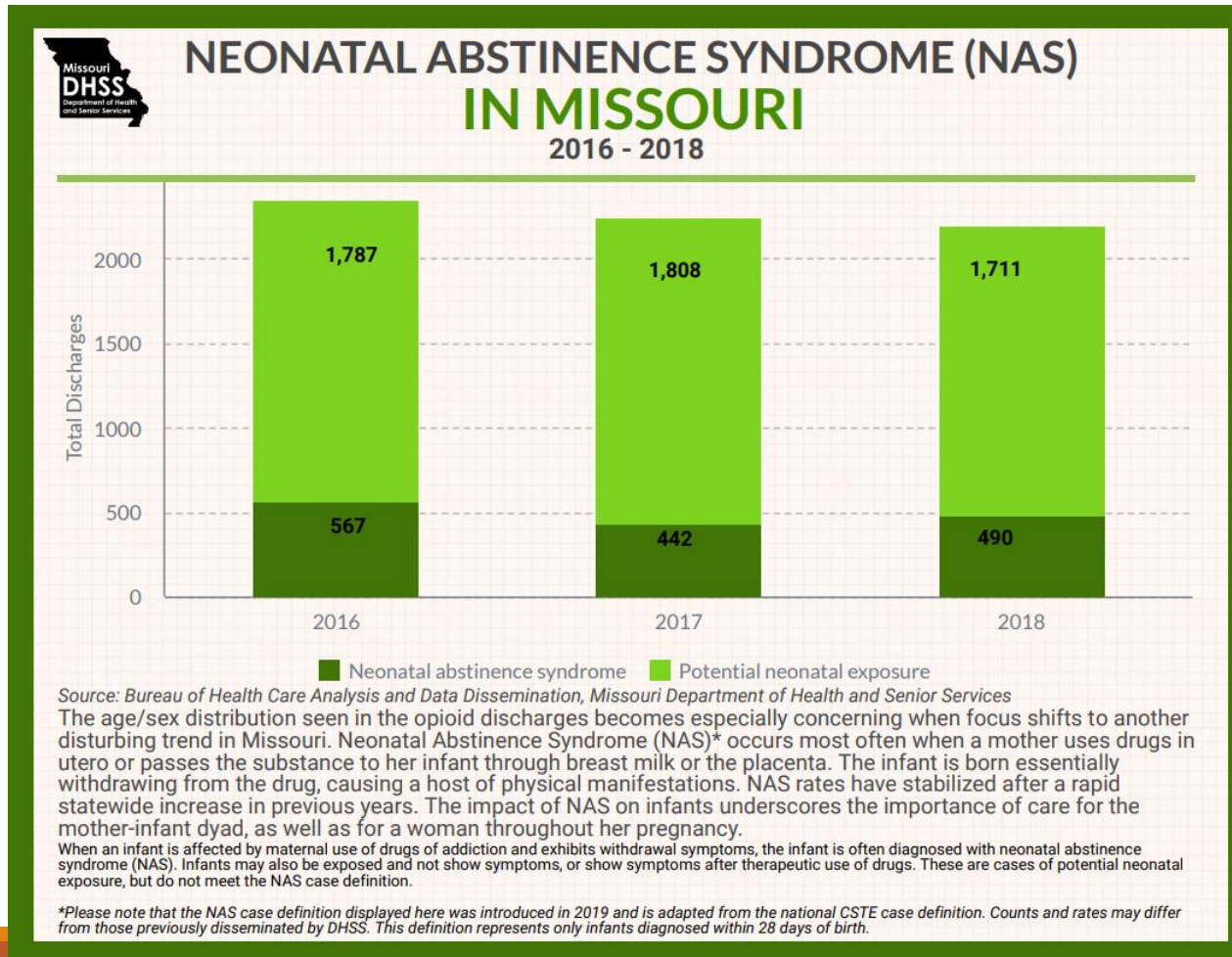
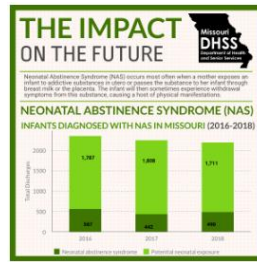


# The Impact on the Future

- Neonatal Abstinence Syndrome (NAS)
  - NAS vs. Potential neonatal exposure
    - CSTE recommended surveillance definition based on ICD-10-CM Code
    - P96.1: Neonatal withdrawal symptoms from maternal use of drugs of addiction
    - Potential exposure includes:
      - P04.4: Newborn affected by maternal use of drugs of addiction
      - P96.2: Withdrawal symptoms from therapeutic use of drugs in newborn
- Years of Potential Life Lost (YPLL)
  - Rate of years lost based on average lifespan of 75 years
  - Rate heavily influenced by younger deaths

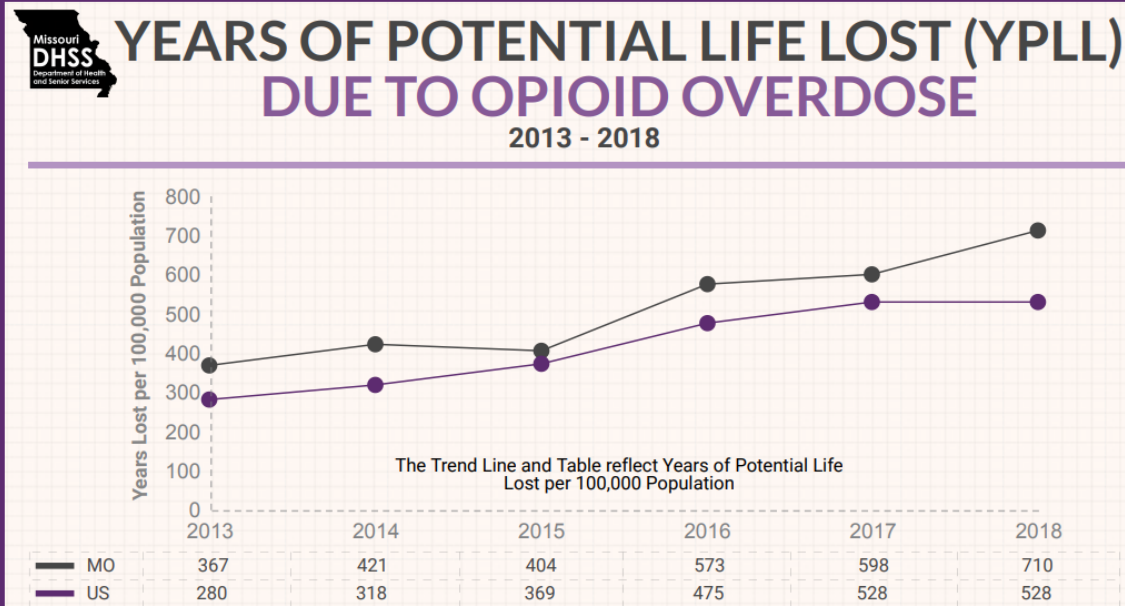
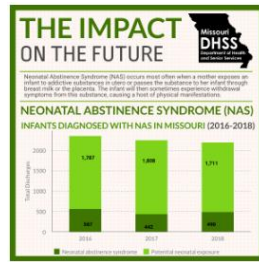


# NAS



-Bureau of Health Care Analysis and Data Dissemination-

# YPLL

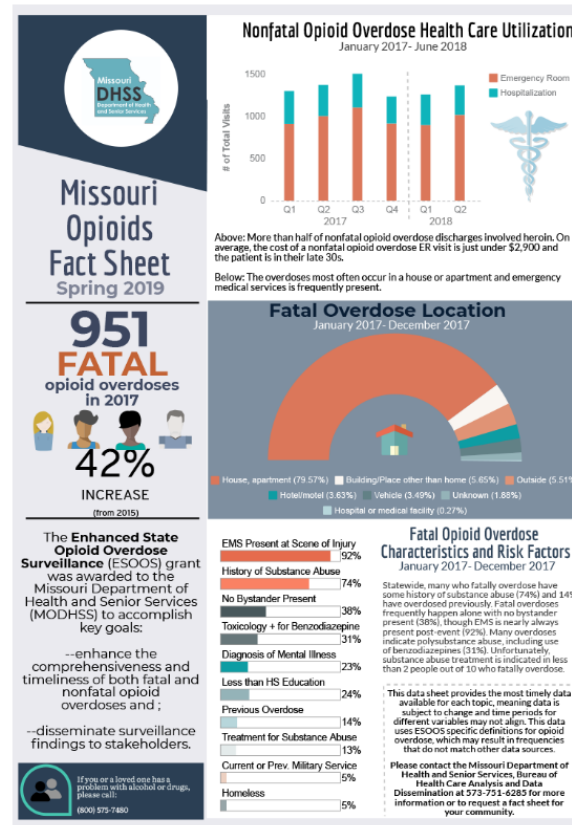
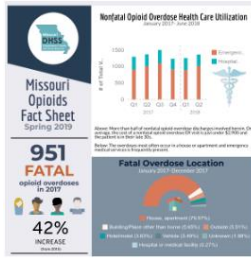


Source: Bureau of Health Care Analysis and Data Dissemination, Missouri Department of Health and Senior Services and WONDER, Centers for Disease Control and Prevention

In 2018, Missouri experienced a loss of 40,376 total years of life due to opioid-involved overdoses. Years of Potential Life Lost (YPLL) can also be displayed as a rate to account for differences in population. The trend line demonstrates how Missouri's YPLL rate has consistently been higher than the U.S. average over the past five years. U.S. data for 2018 is not yet available, so a rate consistent with 2017 has been assumed.

YPLL involves estimating the average time a person would have lived had they not died prematurely. It accounts for the age of decedents while using a standard, 75-year lifespan. For example, if a 70-year-old individual died of drug overdose, statistics would quantify the loss at five potential years of life lost. If a 20-year-old individual were to die, the loss would be 55 years. Because drug overdose predominantly claim younger lives, this statistic is especially powerful.

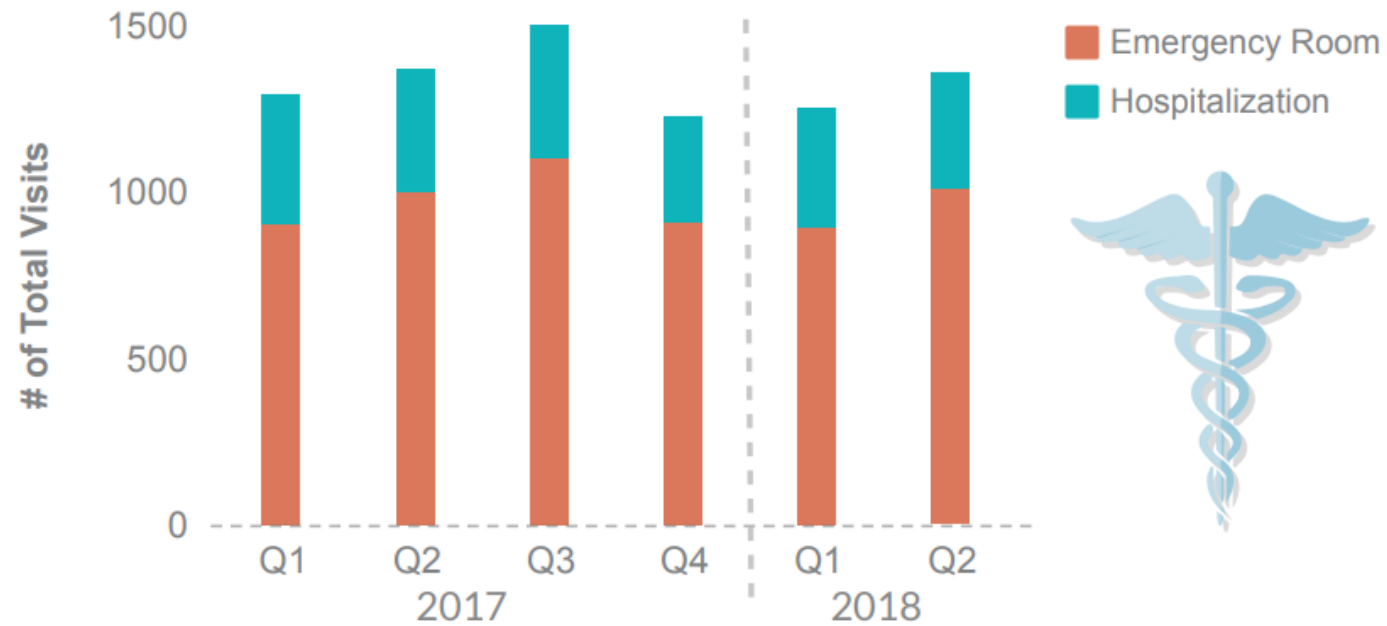
# Opioid Fact Sheets



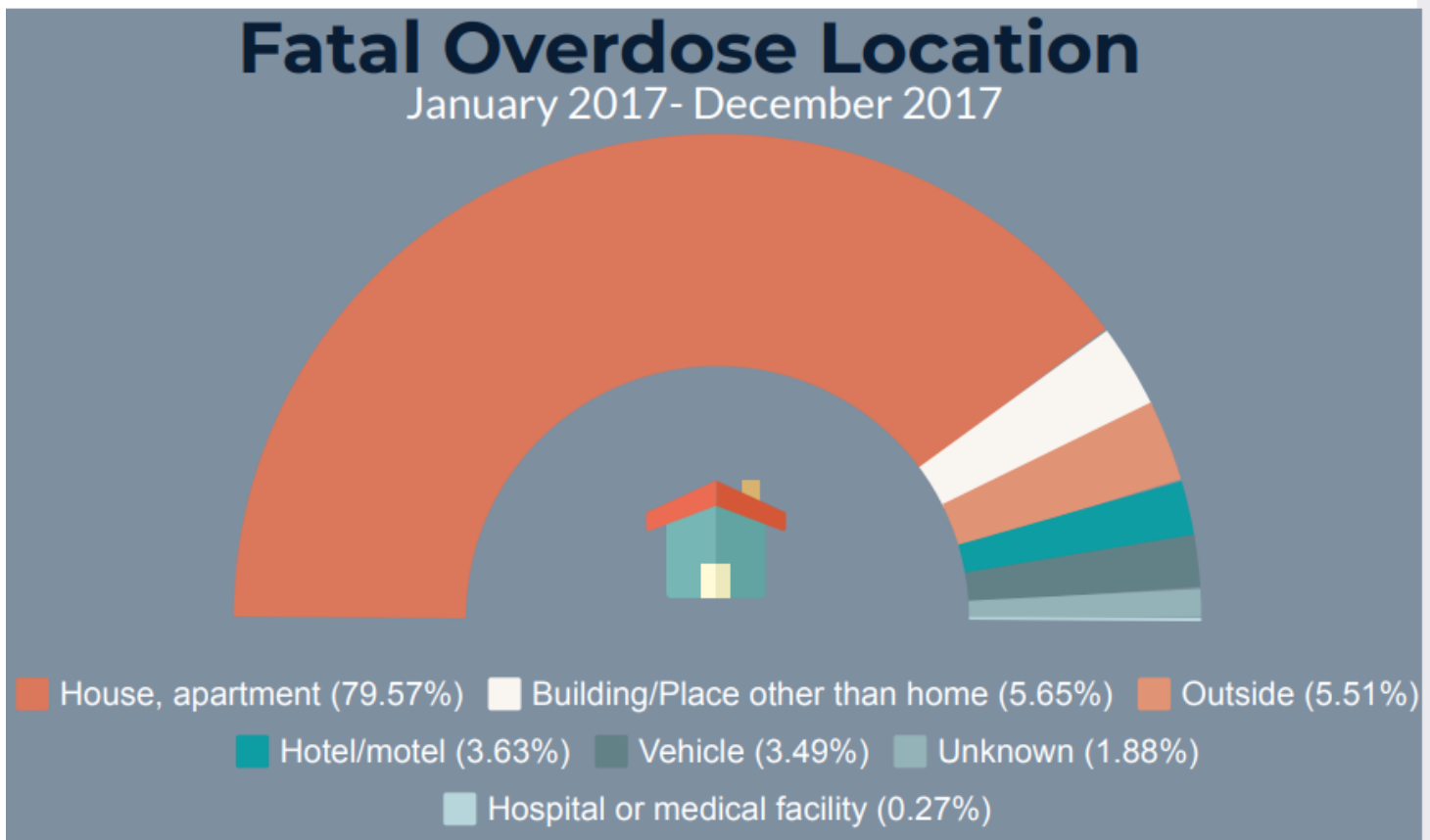
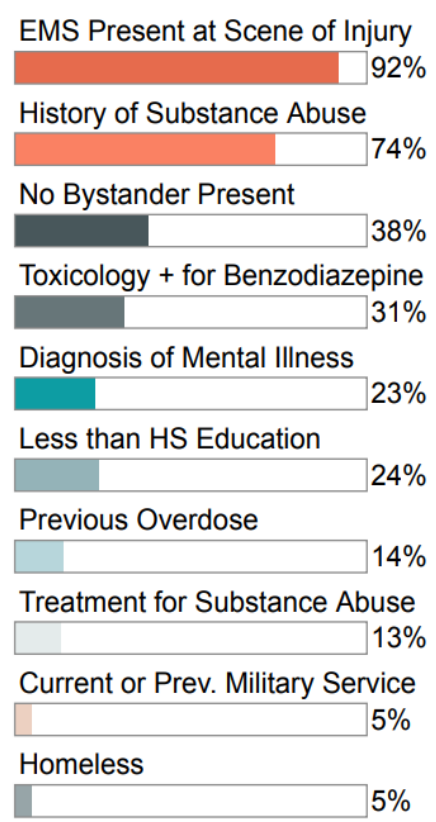


# Opioid Fact Sheet Cont.

## Nonfatal Opioid Overdose Health Care Utilization January 2017- June 2018



# Opioid Fact Sheet Cont.



# Acknowledgements

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- Local Public Health Agencies (LPHAs)
- Opioid Community of Practice (OCP)

# Questions?

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